

Fill in	this infor	rmation to identify you	r case:			
Debtor		Scott Loren Lev				
Dobioi	•	First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
United	States B	ankruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA		
Case r	number	21-55036				
(if known	1)				_	theck if this is an mended filing
		orm 107 t of Financial	Affairs for Indivic	luals Filing for B	ankruptcy	4/19
nforma	ation. If I		attach a separate sheet to		equally responsible for sup vadditional pages, write you	
Part 1			rital Status and Where You	Lived Before		
1. W	hat is yo	ur current marital statu	is?			
□	Marrie Not ma					
2. Du	uring the	last 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. L	ist all of the places you I	ived in the last 3 years. Do no	ot include where you live now	·.	
D	ebtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	No Yes. M	lake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2	Expla	ain the Sources of You	r Income			
Fil	I in the to	tal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	No					
	Yes. F	ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		1 of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$81,666.66	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2020)	■ Wages, commissions, bonuses, tips	\$220,416.54	☐ Wages, commission bonuses, tips	ons,
	☐ Operating a business		☐ Operating a busine	ess
For the calendar year before that: (January 1 to December 31, 2019)	■ Wages, commissions, bonuses, tips	\$207,499.88	☐ Wages, commission bonuses, tips	ons,
	☐ Operating a business		☐ Operating a busine	ess
 Did you receive any other incom Include income regardless of whet and other public benefit payments; winnings. If you are filing a joint ca List each source and the gross inc No Yes. Fill in the details. 	her that income is taxable. Examples pensions; rental income; interest and you have income that you	amples of other income are a rest; dividends; money collect you received together, list it contains the contains and the cont	ted from lawsuits; royalt only once under Debtor 1	ies; and gambling and lottery
	Dahtan 4		Dahtan 0	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2020)	Economic Impact Payment	\$1,200.00		
	Loan Repayment	\$2,000.00		
For the calendar year before that: (January 1 to December 31, 2019)	Dividends	\$19.20		
Part 3: List Certain Payments You	ı Made Before You Filed for	Bankruptcy		
6. Are either Debtor 1's or Debtor 2	2's debts primarily consume	r debts?		
No. Neither Debtor 1 nor I	Debtor 2 has primarily consular personal, family, or househo	umer debts. Consumer debt	s are defined in 11 U.S.C	C. § 101(8) as "incurred by an
During the 90 days before No. Go to line	ore you filed for bankruptcy, di 7.	id you pay any creditor a tota	l of \$6,825* or more?	
paid that c	each creditor to whom you par reditor. Do not include paymer payments to an attorney for t	nts for domestic support oblig		
	nt on 4/01/22 and every 3 year		or after the date of adjus	stment.
	or both have primarily consu ore you filed for bankruptcy, di		of \$600 or more?	
☐ No. Go to line	7.			
☐ Yes List below include pay	each creditor to whom you pai			aid that creditor. Do not do not include payments to an
Creditor's Name and Address	Dates of payme	ent Total amount	Amount you Was	s this payment for

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7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider.	rtners; relatives of any gen- control, or owner of 20% of	eral partners; partnerships of which r more of their voting securities; and	you are a general partner; corporations any managing agent, including one for
	Insider's Name and Address	Dates of payment	Total amount Amount you	Reason for this payment
		, ,	paid still owe	
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer any property on	account of a debt that benefited an
	Insider's Name and Address	Dates of payment	Total amount Amount you	
			paid still owe	Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures		
9.	Within 1 year before you filed for bankruptor List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.			
	Case title Case number	Nature of the case	Court or agency	Status of the case
	Scott L. Leventhal v. Joseph Kavana 21-60349-CIV	Declaratory Judgment Action	USDC, Southern District of Florida	■ Pending □ On appeal □ Concluded
	Choate Construction Company v. Interfinancial Midtown, Inc., et al. 05-1-6700		Superior Court of Cobb County, Georgia	■ Pending □ On appeal □ Concluded
	Choate Construction Company v. Interfinancial Midtown, Inc., et al. 18-1-5244			■ Pending □ On appeal □ Concluded
	First Chatham Bank v. Liberty Capital, LLC, et al. SUV2019000160		Superior Court, Liberty County, Georgia	☐ Pending ☐ On appeal ☐ Concluded
	KGH International Development, LLC v. Scott L. Leventhal, et al. 2021-011007-CA-01 (43)		Circuit Court for 11th Judicial Circuit Miami-Dade County, FL	■ Pending □ On appeal □ Concluded
	Joseph Kavana v. Scott Leventhal 21-cv-20612-CMA		USDC, Southern District of Florida	☐ Pending ☐ On appeal ☐ Concluded
				Dismissed

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036

	Case title Case number	Nature of the case	Court or agency	Status of the	ne case
	Taylor English Duma LLP v. Scott L. Leventhal, 13th Street Holdings, LLC and Tivoli Properties, LLC		Bay Mediation and Arbitration Services	☐ Pending☐ On app	eal
	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, foreclosed	, garnished, attache	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property Explain what happened	d	Date	Value of the property
	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		luding a bank or financial ins	stitution, set off any	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amount
Par	court-appointed receiver, a custodian, or an No Yes List Certain Gifts and Contributions Within 2 years before you filed for bankrupt No Yes. Fill in the details for each gift.		s with a total value of more th	nan \$600 per person	?
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and	Describe the gifts		Dates you gave the gifts	Value
	Address: Jennie Foster	Christmas Gift		December 2019	\$1,032.37
	Person's relationship to you: Girlfriend				
14.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift or cont		s or contributions with a tota	l value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		u contributed	Dates you contributed	Value

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	•		Document	Page 5 of 5	5		
Debt	tor 1 Scott Loren Leventhal				Case number (if known) 21-55036	
Part	6: List Certain Losses						
Tart	C. Elst Certain E033e3						
	Within 1 year before you filed for bank or gambling?	ruptcy or	since you filed fo	r bankruptcy, did y	ou lose anytl	hing because of thef	t, fire, other disaste
 	■ No □ Yes. Fill in the details.						
	Describe the property you lost and	Descri	be any insurance	coverage for the lo	oss	Date of your	Value of property
	how the loss occurred			nsurance has paid. L 33 of <i>Schedule A/B:</i>		loss	los
Part	7: List Certain Payments or Transfe	ers					
(Within 1 year before you filed for bank consulted about seeking bankruptcy o Include any attorneys, bankruptcy petitior	r preparir	ig a bankruptcy p	etition?			rty to anyone you
ı	□ No						
i	Yes. Fill in the details.						
	Person Who Was Paid		Description and	d value of any prope	ertv	Date payment	Amount of
	Address		transferred			or transfer was	paymen
	Email or website address Person Who Made the Payment, if Not	You				made	
	Scroggins & Williamson, P.C.		\$11.588.50 pa	yment for pre-pe	tition	6/25/21:	\$60,000.00
	4401 Northside Parkway		services and			\$10,000.00	* ,
	Suite 450		¢40 444 50 Cb			from Ronald	
	Atlanta, GA 30327 www.swlawfirm.com		\$48,411.50 Cn	apter 11 retainer		Leventhal	
	Ronald Leventhal, Dorothy Leven	thal				7/2/21:	
						\$50,000.00	
						from Dorothy Leventhal	
-						Leventilai	
	Within 1 year before you filed for bank promised to help you deal with your cr Do not include any payment or transfer th	editors o	to make paymer			r transfer any prope	rty to anyone who
I	No						
[Yes. Fill in the details.						
	Person Who Was Paid Address		Description and transferred	d value of any prope	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bank transferred in the ordinary course of ye				ster any prop	erty to anyone, othe	r than property
i 	Include both outright transfers and transfe include gifts and transfers that you have a No Yes. Fill in the details.				ecurity interes	t or mortgage on your	property). Do not
	Person Who Received Transfer		Description and	d value of	Describe	any property or	Date transfer was
	Address		Description and property transfe			any property or received or debts change	made
	Person's relationship to you						
	Within 10 years before you filed for bar			any property to a se	elf-settled tru	st or similar device	of which you are a

19

No

☐ Yes. Fill in the details.

Name of trust Description and value of the property transferred **Date Transfer was** made

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Pa	t 8:	List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and S	torage Uni	ts	
20.	solo Incl	nin 1 year before you filed for bankrupto d, moved, or transferred? ude checking, savings, money market, o ses, pension funds, cooperatives, asso	or other financial accour	nts; certificates	s of deposi	•	, ,
		No Yes. Fill in the details.					
			Land Aultonian of	T		D-1	1 1 1 - 1
		me of Financial Institution and dress (Number, Street, City, State and ZIP e)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.		you now have, or did you have within 1 y h, or other valuables?	year before you filed for	bankruptcy, a	ny safe de	posit box or other deposi	tory for securities,
		No					
		Yes. Fill in the details.					
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
	48	nk of America 51 Lower Roswell Road rietta, GA 30068	,			ce Policies and Other with No Monetary	□ No ■ Yes
22.	Hav	e you stored property in a storage unit on No Yes. Fill in the details.	or place other than your	nome within 1	year beto	re you filed for bankrupto	sy?
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9:	Identify Property You Hold or Control	for Someone Else				
23.		you hold or control any property that so someone.	meone else owns? Inclu	ıde any proper	rty you bor	rowed from, are storing f	or, or hold in trust
		No Yes. Fill in the details.					
		rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pai	t 10:	Give Details About Environmental Info	ormation				
For	the p	ourpose of Part 10, the following definition	ons apply:				
	toxi	rironmental law means any federal, state c substances, wastes, or material into tl ulations controlling the cleanup of these	he air, land, soil, surface	water, ground	• .		
	Site	means any location, facility, or property	y as defined under any e	environmental	law, wheth	er you now own, operate	, or utilize it or used

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

to own, operate, or utilize it, including disposal sites.

hazardous material, pollutant, contaminant, or similar term.

Debtor 1 Scott Loren Leventhal

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24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit o	f any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or	Connections to Any Business						
27.	Within 4 years before you filed for bankrup	otcy, did you own a business or have an	y of the following connections to any	/ business?				
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability com	pany (LLC) or limited liability partnershi	ip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing e	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation						
	■ No. None of the above applies. Go to	Part 12.						
	Yes. Check all that apply above and fi	ll in the details below for each business	3.					
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number of					
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed					
	Trillist Companies, Inc.	Real Estate Investment,	EIN: 46-5708344					
	One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309	Development and Management Firm	From-To 06/01/2014 - 07/20/	/2021				
	Alianta, OA 00000	HLB Gross Collins						
	Blue Horseshoe Investments, LLC	Investment Company	EIN:					
	One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		From-To 10/31/2011 - 7/20/2	2021				
	13th Street Holdings, LLC	Real Estate Investment	EIN:					
	One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		From-To XXXXXX - 7/20/21					

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Business Name Address (Number, Street, City, State and ZIP Code) Tivoli Properties, Inc. One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309 Interfinancial Properties, Inc.	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN: From-To EIN:
One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		From-To
Interfinancial Midtown, Inc. One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
JJC Holdings, LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
Tivoli Realty Services, Inc. One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
Fulcrum Manager, Inc. One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
Cumberland Creek Properties, Inc. One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
Trillist Management LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
Trillist Realty Advisors LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
Trillist Development LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
BHI 1138 Peachtree LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To

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Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
SLL Aqua LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
Del Sol Development Company One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
SLL 1138 LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
SLL 2171 Peachtree LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
SLL 643 LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
SLL Summit LLC One Midtown Plaza, Suite 750 1360 Peachtree Street, NE Atlanta, GA 30309		EIN: From-To
Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to an	yone about your business? Include all financial
□ No■ Yes. Fill in the details below.Name	Date Issued	

Name Address

(Number, Street, City, State and ZIP Code)

The Northern Trust Company 3282 Northside Parkway Suite 100 Atlanta, GA 30327

CIM Group 17950 Preston Road Suite 660 **Dallas, TX 75252**

Ardent Financial 3565 Piedmont Road, NE **Building One, Suite 200** Atlanta, GA 30305

Hays Financial Consulting LLC 2964 Peachtree Road NW Suite 555 Atlanta, GA 30305

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036

Part 12: Sign Below	
	cial Affairs and any attachments, and I declare under penalty of perjury that the answers se statement, concealing property, or obtaining money or property by fraud in connection 0,000, or imprisonment for up to 20 years, or both.
/s/ Scott Loren Leventhal	
Scott Loren Leventhal Signature of Debtor 1	Signature of Debtor 2
Date _July 28, 2021	Date
Did you attach additional pages to Your Statement of	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
□Yes	
Did you pay or agree to pay someone who is not an	attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person Attach the Bankruptcy	Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	tion to identify your	case and time	, illing.			
Deptor 1	• • • •					
	Scott Loren Lever First Name	enthal Middle N	lame	Last Name		
Debtor 2						
(Spouse, if filing)	First Name	Middle N		Last Name		
United States Bankr	ruptcy Court for the:	NORTHERN	DISTRICT OF G	EORGIA		
Case number 21-	-55036					☐ Check if this is an amended filing
n each category, sepa hink it fits best. Be a	A/B: Properties and describes complete and accurate is needed, attack	pe items. List an ate as possible.	If two married peo	If an asset fits in more than one ple are filing together, both are the top of any additional pages	equally responsible for	or supplying correct
Do you own or have	e any legal or equitab	le interest in any	y residence, buildii	ng, land, or similar property?		
Yes. Where is th	e property?					
Yes. Where is th			What is the prope	erty? Check all that apply		
Yes. Where is the 1.1 5887 Riverst		<u> </u>	Single-fami		the amount of any se	ed claims or exemptions. Put cured claims on <i>Schedule D:</i> Claims Secured by Property.
Yes. Where is the second of th	cone Circle vailable, or other description	339-0000 ZIP Code	Single-fami Duplex or n Condomini Manufactur Land	ily home nulti-unit building um or cooperative red or mobile home	the amount of any se	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Yes. Where is the second of th	cone Circle vailable, or other description GA 30	339-0000	Single-fami Duplex or n Condominin Manufactur Land Investment Timeshare	ily home nulti-unit building um or cooperative red or mobile home	Current value of the entire property? \$452,000.0 Describe the nature (such as fee simple.	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? \$\frac{4}{5}\frac{5}{0}\frac{3}{0}\frac{4}{5}\frac{5}{0}\frac{5}{0}\frac{1}{0}\f
Yes. Where is the second of th	cone Circle vailable, or other description GA 30	339-0000	Single-fami Duplex or n Condominin Manufactur Land Investment Timeshare Other	ily home inulti-unit building um or cooperative red or mobile home property Fownhome est in the property? Check one	Current value of the entire property? \$452,000.0	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? \$\frac{4}{5}\frac{2}{3}\frac{1}\frac{1}{3}\frac{1}{3}\frac{1}{3}\frac

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Dept	or 1 <u>S</u>	cott Loren i	Leventnai	Case number (if known)	21-55036
3. C a	rs. vans.	trucks, tract	ors, sport utility vehicles, motorcycles		
o. o .	.0, va0,	iraono, iraoi	ore, eport unity verileies, meteroyeles		
	No				
	Yes				
3.1	Make:	Mercedes	Who has an interest in the property? Object	Do not deduct secu	ured claims or exemptions. Put
3.1		560		the amount of any	secured claims on Schedule D:
	Model:		Debtor 1 only	Creditors Who Have	ve Claims Secured by Property.
	Year:	2018	Debtor 2 only	Current value of t	
		ate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	ormation:	At least one of the debtors and another		
	Lease			\$0	.00 \$0.00
			Check if this is community property (see instructions)		
			(
				Do not doduct coo	urad alaima ar avamatiana. Dut
3.2	Make:	Cadillac	Who has an interest in the property? Check		ured claims or exemptions. Put secured claims on Schedule D:
	Model:	Escalade	■ Debtor 1 only		ve Claims Secured by Property.
	Year:	2007	☐ Debtor 2 only	Current value of t	the Current value of the
	Approxim	ate mileage:	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info		☐ At least one of the debtors and another		
			☐ Check if this is community property	\$10,000	.00 \$10,000.00
			(see instructions)		
.pa Part 3 Do y	nges you Describ	have attache	the portion you own for all of your entries from Part 2, incled for Part 2. Write that number here		\$10,000.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> :		Major appliand	ces, furniture, linens, china, kitchenware		
			Kitchen Appliances, Furnishings and Other Person	nal Property	\$5,000.00
E:	,	ncluding cell	nd radios; audio, video, stereo, and digital equipment; compute phones, cameras, media players, games	ers, printers, scanners; music co	ollections; electronic devices
			TVs, Cell Phone, Laptop Computer		\$1,500.00
		Antiques and	figurines; paintings, prints, or other artwork; books, pictures, or	other art objects; stamp, coin,	or baseball card collections;

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Debtor 1	Scott Loren	Leventhal	Case number (if known)	21-55036
		Various Paintings		\$2,500.00
Exan	musical instru	graphic, exercise, and other hobby equipment; bicycles, pool ta	ables, golf clubs, skis; canoes a	nd kayaks; carpentry tools;
		Old Snow Ski Equipment		\$500.00
☐ No	mples: Pistols, rifles	s, shotguns, ammunition, and related equipment Various Firearms		\$20,000.00
□ No	mples: Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories		
		Clothing		\$2,000.00
□ No	mples: Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirlo	oom jewelry, watches, gems, go	sld, silver \$10,000.00
Exa ■ No □ Ye	es. Describe	oirds, horses d household items you did not already list, including any h	ealth aids you did not list	
■ No			ealth alus you did not list	
☐ Ye	es. Give specific info	ormation	_	
		of all of your entries from Part 3, including any entries for p number here	0 ,	\$41,500.00
	Describe Your Finance			
Do you	own or have any le	egal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	<i>mples:</i> Money you h	nave in your wallet, in your home, in a safe deposit box, and on	hand when you file your petitio	n
			Cash	\$1,500.00

Official Form 106A/B Schedule A/B: Property

page 3

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036

□ No ■ Yes	··		Institution name:			
	17.1.	Checking	Renasant Bank			\$9,633.00
	17.2.	Savings	Renasant Bank			\$1,400.00
	17.3.	Other financial account	Robinhood			\$950.00
	17.4.	Other financial account	ETrade			\$933.00
18. Bonds, mutual fun <i>Examples:</i> Bond fu			rage firms, money market accounts			
■ Yes		Institution or issuer nan	ne:			
	-	The Coca-Cola Con	npany			\$456.00
19. Non-publicly trade joint venture □ No	d stock and	interests in incorpora	ted and unincorporated business	es, including an	interest in an	LLC, partnership, and
_		about them me of entity:		% of ownership):	
	The	e Trillist Companies	s, Inc.	50	_ %	Unknown
	Blu	ue Horseshoe Inves	tments LLC	50	_ %	Unknown
	<u> </u>	C Holdings LLC		100	_ %	Unknown
	Tiv	voli Properties, Inc.		100 Shares	_ %	Unknown
	Inte	erfinancial Propertion	es, Inc.	500 Shares	_ %	Unknown
	Int	erfinancial Midtown	, Inc.	150,500 Shares	_ %	Unknown
	131	th Street Holdings, I	LC	30	_ %	Unknown
	Tiv	oli Realty Services,	Inc.	100 Shares	_ %	Unknown
	Fu	lcrum Manager, Inc.		100 Shares	_ %	Unknown
	Cu	mberland Creek Pro	onerties Inc	50 Shares	%	Unknown

17. Deposits of money

Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036

	Negotiable instruments in Non-negotiable instrumen ■ No □ Yes. Give specific inform	nclude personal checks, cashiers' ents are those you cannot transfer the mation about them Issuer name:	and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
	Retirement or pension a Examples: Interests in IR No Yes. List each account:	RA, ERISA, Keogh, 401(k), 403(b), separately.	thrift savings accounts, or other pension or profit-sharing plans	S
22.		repayments deposits you have made so that y	Institution name: You may continue service or use from a company utilities (electric, gas, water), telecommunications companies,	or others
	■ No □ Yes	viii iaituloius, prepalu reiti, public	Institution name or individual:	or others
	Annuities (A contract for	a periodic payment of money to yo	ou, either for life or for a number of years)	
	■ No □ YesIssu	uer name and description.		
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 52 ■ No	n IRA, in an account in a qualifie 29A(b), and 529(b)(1).	d ABLE program, or under a qualified state tuition prograi	m.
			arately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts, equitable or futu ■ No □ Yes. Give specific infor		han anything listed in line 1), and rights or powers exercis	able for your benefit
			er intellectual property m royalties and licensing agreements	
		•	e association holdings, liquor licenses, professional licenses	
M	oney or property owed to	you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	u		
	■ No □ Yes. Give specific inform	mation about them, including whet	ther you already filed the returns and the tax years	
	Family support Examples: Past due or lu ■ No □ Yes. Give specific inform		t, child support, maintenance, divorce settlement, property sett	lement
30.		s, disability insurance payments, d aid loans you made to someone el	lisability benefits, sick pay, vacation pay, workers' compensati lse	on, Social Security

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Debto	or 1	Scott Loren Leventhal	Doddinent	Case number (if known)	21-55036
Е		ts in insurance policies les: Health, disability, or life ins	urance; health savings account	(HSA); credit, homeowner's, or renter's insura	nce
	Yes. I	Name the insurance company of Company	of each policy and list its value. y name:	Beneficiary:	Surrender or refund value:
		Northw	estern Mutual	Scott Loren Leventhal	\$67,826.00
If S	you a		you from someone who has d ist, expect proceeds from a life i	ied nsurance policy, or are currently entitled to red	ceive property because
_		Give specific information			
	<i>xamp</i> No		er or not you have filed a laws putes, insurance claims, or righ	uit or made a demand for payment ts to sue	
			Potential Claims Against	Various Third Parties	Unknown
35. Ai	ny fina No Yes. Add tl		·	any entries for pages you have attached	\$82,698.00
Part 5	Dos	cariba Any Rusinass-Palatad Pro	perty You Own or Have an Interes	t In List any roal octato in Part 1	
37. Do	you o		e interest in any business-related	•	
Part 6		scribe Any Farm- and Commercia ou own or have an interest in farmla	I Fishing-Related Property You Ov and, list it in Part 1.	wn or Have an Interest In.	
	No. (own or have any legal or equipolego to Part 7. Go to line 47.	uitable interest in any farm- or	commercial fishing-related property?	
Part 7	:	Describe All Property You Own	or Have an Interest in That You D	oid Not List Above	
<i>E</i>	xamp No	have other property of any keles: Season tickets, country clusive specific information			

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1 **Scott Loren Leventhal** Case number (if known) 21-55036 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$452,000.00 Part 2: Total vehicles, line 5 \$10,000.00 Part 3: Total personal and household items, line 15 57. \$41,500.00 Part 4: Total financial assets, line 36 58. \$82,698.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$134,198.00 Copy personal property total \$134,198.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$586,198.00

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this infor	rmation to identify your	case:			
Debtor 1	Scott Loren Leve	nthal			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA		
Case number	21-55036				
(if known)				☐ Check if this is an	า
				amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$10,000.00		\$5,000.00	O.C.G.A. § 44-13-100(a)(3)
		100% of fair market value, up to any applicable statutory limit	
\$0.00		\$5,000.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$0.00		\$500.00	O.C.G.A. § 44-13-100(a)(5)
		100% of fair market value, up to any applicable statutory limit	
\$0.00		\$1,200.00	O.C.G.A. § 44-13-100(a)(6)
		100% of fair market value, up to any applicable statutory limit	
\$0.00		\$21,500.00	O.C.G.A. § 44-13-100(a)(1)
		100% of fair market value, up to any applicable statutory limit	
	\$0.00	\$0.00 \$0.00	Check only one box for each exemption. \$10,000.00 \$10,000.00 \$100% of fair market value, up to any applicable statutory limit \$0.00 \$0.00 \$100% of fair market value, up to any applicable statutory limit \$0.00 \$100% of fair market value, up to any applicable statutory limit \$0.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit

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Debto	or 1	Scott Loren Leventhal		Case number (if known)	21-55036	
		description of the property and line on full A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption	
		Nalue of Northwestern Mutual	\$67,826.00		\$2,000.00	O.C.G.A. § 44-13-100(a)(9)
		rom Schedule A/B:		100% of fair market value, up to any applicable statutory limit		
	•	ou claiming a homestead exemption eact to adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	t.)
i		No				
	ן י	res. Did you acquire the property covered	215 days before you filed this case?	•		
	١	□ No				
	I	☐ Yes				

numb 1. Do Part 2. List for each	eded, copy the Aper (if known). any creditors had No. Check the Yes. Fill in a List All Set all secured claim. If more	ave claims secured by his box and submit the life of the information because Claims aims. If a creditor has not be than one creditor has the claims in alphabetic	nis form to the court with your o	ne creditor separately editors in Part 2. As s name.		, , ,	Column C Unsecured portion If any \$1,830,070.7
numb 1. Do Part 2. Listor es	eded, copy the Aper (if known). any creditors ha No. Check th Yes. Fill in a List All set all secured claim. If more has possible, list	ave claims secured by his box and submit the life of the information because Claims aims. If a creditor has not be than one creditor has the claims in alphabetic	nore than one secured claim, list the a particular claim, list the other cre	other schedules. You not be creditor separately editors in Part 2. As	Column A Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion If any
numb 1. Do 	eded, copy the Aper (if known). any creditors ha No. Check th Yes. Fill in a	ave claims secured by his box and submit th Il of the information b Secured Claims	pelow.	other schedules. You	u have nothing else t	to report on this form.	
numb 1. Do 	eded, copy the Aper (if known). any creditors ha No. Check the Yes. Fill in a	ave claims secured by nis box and submit the ll of the information by	nis form to the court with your o			, , ,	me and case
numb 1. Do 	eded, copy the A er (if known). any creditors ha D No. Check th	ave claims secured by	nis form to the court with your o			, , ,	me and case
numb 1. Do	eded, copy the A per (if known). any creditors ha	ave claims secured by	, , , ,			, , ,	me and case
numb	eded, copy the A er (if known).	3 ,	your property?		the top of any addition	nai pages, write your nai	me and case
	eded, copy the A		,	ion it to time form. On	the top of any addition	nai pages, write your nai	me and case
	complete and a		If two married people are filing to				tion. If more space
	cial Form hedule D		Who Have Clain	ns Secured	by Propert	У	12/15
						amend	led filing
(if kno	· · · · <u>- ·</u>	-55050				☐ Check	if this is an
Cas	e number 21	-55036					
Unit	ed States Bank	ruptcy Court for the:	NORTHERN DISTRICT O	F GEORGIA		-	
Deb (Spou	tor 2 ise if, filing)	First Name	Middle Name	Last Name		-	
1		First Name	Middle Name	Last Name			
		Scott Loren Lev	enthal				
Deb	tor 1	Coott Lavan Lav					
		South Loren Lov	r case:				
			Document r case:	t Page 20 (01 55		

5887 Riverstone Circle Atlanta, GA 30339 Cobb County

As of the date you file, the claim is: Check all that apply.

☐ Contingent

Unliquidated

Disputed

Who owes the debt? Check one. Nature of lien. Check all that apply. ■ Debtor 1 only

 $\hfill \square$ An agreement you made (such as mortgage or secured

☐ Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit

☐ Other (including a right to offset)

☐ Check if this claim relates to a

☐ At least one of the debtors and another

8200 Roberts Drive

Atlanta, GA 30350

Number, Street, City, State & Zip Code

#600

Debtor 2 only

community debt

Date debt was incurred

Debtor 1 and Debtor 2 only

Last 4 digits of account number

Official Form 106D

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Debtor 1 Scott Loren Leventhal	Case number (if known)	21-55036		
First Name Middle N	ame Last Name			
Cobb County Tax	Describe the property that secures the claim:	\$3,926.36	\$0.00	\$3,926.36
Creditor's Name	Secured by Residence			
Ground Critains				
Post Office Box 100127 Marietta, GA 30061-7027	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Number, Street, Oily, State & 219 Gode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured		
☐ Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 Dorothy A Leventhal	Describe the property that secures the claim:	\$475,653.45	\$452,000.00	\$23,654.45
Creditor's Name	5887 Riverstone Circle Atlanta, GA 30339 Cobb County			
353 Woodlawn Drive Marietta, GA 30067	As of the date you file, the claim is: Check all that apply.			
· · · · · · · · · · · · · · · · · · ·	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.4 Northwestern Mutual	Describe the property that secures the claim:	\$72,298.01	\$0.00	\$72,298.01
Creditor's Name	Loan Secured by Cash Value in Life Insurance Policies			
PO Box 3009				
Milwaukee, WI	As of the date you file, the claim is: Check all that apply.			
53201-3009	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$2,833,948.52

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Debtor 1	otor 1 Scott Loren Leventhal			Case number (if known)	21-55036	
	First Name	Middle Name	Last Name			

If this is the last page of your form, add the dollar value totals from all pages.

\$2,833,948.52

Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

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			Document	Page 23 of 5	55		
Fill in	this info	ormation to identify your ca	se:				
Debto	or 1	Scott Loren Levent	hal				
		First Name	Middle Name	Last Name			
Debto	or 2 e if, filing)	First Name	Middle Name	Last Name			
(Spous	e ii, iiiiig)						
Unite	d States I	Bankruptcy Court for the:	NORTHERN DISTRICT OF	GEORGIA			
Case	number	21-55036					
(if know						☐ Check	if this is an
						amend	led filing
Off:	sial Ea	rm 1065/5					
		<u>rm 106E/F</u>	a Hava Haaaaura	d Claima			40/4E
		E/F: Creditors Wh					12/15
Schedi eft. Att	ule D: Cre tach the C	ecutory Contracts and Unexpire ditors Who Have Claims Secure continuation Page to this page. number (if known).	ed by Property. If more space	is needed, copy the Part	you need, fill it out, i	number the entries i	n the boxes on the
Part 1	1: List	All of Your PRIORITY Unse	ecured Claims				
1. D	o any cred	ditors have priority unsecured of	claims against you?				
	No. Go t	o Part 2.					
	Yes.						
id po	entify what ossible, list	our priority unsecured claims. It type of claim it is. If a claim has the claims in alphabetical order are than one creditor holds a particular than the content of the content	both priority and nonpriority amo according to the creditor's name.	unts, list that claim here a If you have more than tw	nd show both priority a	nd nonpriority amoun	ts. As much as
(F	or an expl	anation of each type of claim, see	e the instructions for this form in	the instruction booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1	Georg	gia Department of Labor	Last 4 digits of acco	ount number	\$0.00	\$0.00	\$0.00
	,	Creditor's Name	When wee the debt				
	Suite	ndrew Young Int'l Blvd. 826	When was the debt	incurred?			
		ta, GA 30303					
		r Street City State Zip Code	As of the date you f	file, the claim is: Check a	III that apply		
'	Who incui —	red the debt? Check one.	☐ Contingent				
	Debtor	1 only	☐ Unliquidated				
l	□ Debtor	2 only	☐ Disputed				
ı	Debtor	1 and Debtor 2 only	Type of PRIORITY ι	ınsecured claim:			
ı	At least	one of the debtors and another	☐ Domestic support	t obligations			
ı	☐ Check	if this claim is for a community	y debt Taxes and certain	n other debts you owe the	government		
		n subject to offset?		or personal injury while yo	u were intoxicated		
- 1	■ No		Other, Specify	Wages, salaries, ar	nd commissions		

☐ Yes

Other. Specify

For Notice Purposes Only

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Debtor	1 Scott Loren Leventhal	Case number (if known)	21-55036	
2.2	Georgia Department of Revenue Priority Creditor's Name	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	1800 Century Boulevard NE Suite 9100	When was the debt incurred?		_	
	Atlanta, GA 30345				
w	Number Street City State Zip Code ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that app	ply		
	_	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Domestic support obligations			
	Check if this claim is for a community debt	Taxes and certain other debts you owe the governm			
	the claim subject to offset?	Claims for death or personal injury while you were in	toxicated		
	No	Other. Specify			
	l Yes	For Notice Purposes Only	1		
2.3	Internal Revenue Service	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name 401 W. Peachtree St. NW Stop 334-D	When was the debt incurred?		_	
	Atlanta, GA 30308				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that app	ply		
_	ho incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Domestic support obligations			
	Check if this claim is for a community debt the claim subject to offset?	 ■ Taxes and certain other debts you owe the governm □ Claims for death or personal injury while you were in 			
	I _{No}	Other. Specify			
	l Yes	For Notice Purposes Only	,		
2.4	Internal Revenue Service	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name Centralized Insolvency P.O. Box 7346	When was the debt incurred?		-	
	Philadelphia, PA 19101-7346				
14/	Number Street City State Zip Code	As of the date you file, the claim is: Check all that app	ply		
_	ho incurred the debt? Check one.	Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Domestic support obligations			
	Check if this claim is for a community debt the claim subject to offset?	■ Taxes and certain other debts you owe the governm □ Claims for death or personal injury while you were in			
	I No	Other. Specify	πολισαίσα		
	l _{Yes}	For Notice Purposes Only	,		
		· · · · · ·			
Part 2:					
	any creditors have nonpriority unsecured claim	-			
_	No. You have nothing to report in this part. Submit	tnis form to the court with your other schedules.			
	Yes.				

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more

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than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Debtor 1 Scott Loren Leventhal

Case number (if known)

21-55036

		Total claim
AFF III Crescent LLC	Last 4 digits of account number	\$9,300,000.00
Nonpriority Creditor's Name 2100 Powers Ferry Road SE Suite 350	When was the debt incurred?	¥-,,
Atlanta, GA 30339 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	■ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Guarantee	
American Express	Last 4 digits of account number	\$21,218.26
P.O. Box 1270	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
American Express	Last 4 digits of account number	\$27,563.58
P.O. Box 1270	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
	· · · ·	
	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
	2100 Powers Ferry Road SE Suite 350 Atlanta, GA 30339 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes American Express Nonpriority Creditor's Name P.O. Box 1270 Newark, NJ 07101-1270 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Yes American Express Nonpriority Creditor's Name Check if this claim is for a community debt Is the claim subject to offset? No Yes American Express Nonpriority Creditor's Name P.O. Box 1270 Newark, NJ 07101-1270 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No	2 100 Powers Ferry Road SE Suite 350 Atlanta, GA 30339 Xunber Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Indignated □ Disputed Type of NONPRIORITY unsecured claim: □ Check if this claim is for a community debt Type Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 only □ Debtor 4 only □ Debtor 4 only □ Debtor 5 only □ Debtor 5 only □ Debtor 5 only □ Debtor 6 only □ Debtor 6 only □ Debtor 6 only □ Debtor 6 only □ Debtor 8 only 100 only

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.4 American Express Last 4 digits of account number \$28,851.97 Nonpriority Creditor's Name P.O. Box 1270 When was the debt incurred? Newark, NJ 07101-1270 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.5 **American Express** \$2,245.97 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 1270 When was the debt incurred? Newark, NJ 07101-1270 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.6 **Angel Oak Commercial Bridge** Last 4 digits of account number \$4,445,722.00 Nonpriority Creditor's Name 3344 Peachtree Road, NE When was the debt incurred? **Suite 1725** Atlanta, GA 30326 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Guarantee ☐ Yes

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.7 **Apple Mastercard** Last 4 digits of account number \$7,414.76 Nonpriority Creditor's Name Issued by Goldman Sachs Bank When was the debt incurred? P.O. Box 7247 Philadelphia, PA 19170 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes **Bank of America Visa** \$8,907.86 4.8 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 15284 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.9 **Blue Horseshoe Investments LLC** Last 4 digits of account number \$823,031.55 Nonpriority Creditor's Name 1360 Peachtree Street, NE When was the debt incurred? Suite 750 Atlanta, GA 30309 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured Line of Credit ☐ Yes

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.1 Briovarz \$1,730.32 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O Box 851380 When was the debt incurred? Minneapolis, MN 55485-1380 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.1 **Capital One Mastercard** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 71083 When was the debt incurred? Charlotte, NC 28272 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 Capital One Neiman Marcus \$114.314.18 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 30285 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

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debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Utilities

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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■ No ☐ Yes report as priority claims

Other. Specify Loan

 $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.1 **Dupree Kimbrough & Carl LLP** \$19,017.25 Last 4 digits of account number 9 Nonpriority Creditor's Name 49 Green Street When was the debt incurred? Marietta, GA 30060 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Legal Fees ☐ Yes 4.2 **Fat Linny LLC** \$305,488.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 7934 Stratford Lane When was the debt incurred? Atlanta, GA 30350 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Guarantee ☐ Yes 4.2 Fox Rothschild LLP \$123.859.29 Last 4 digits of account number Nonpriority Creditor's Name 2000 Market Street 20nd Floor When was the debt incurred? Philadelphia, PA 03222 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Legal Fees

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.2 Georgia Power \$100.96 Last 4 digits of account number 2 Nonpriority Creditor's Name 96 Annex When was the debt incurred? Atlanta, GA 30396 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes 4.2 Hays Financial Consulting LLC \$75,000.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 2964 Peachtree Road NW When was the debt incurred? Suite 555 Atlanta, GA 30305 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Receiver Fees ☐ Yes 4.2 **HLB Gross Collins PC** \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name 3330 Cumberland Blvd When was the debt incurred? **Suite 1000** Atlanta, GA 30339 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

■ Other. Specify Accounting Fees

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.2 Infinite Energy \$46.76 Last 4 digits of account number 5 Nonpriority Creditor's Name PO Box #71247 When was the debt incurred? Charlotte, NC 28272-1247 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utilities ☐ Yes 4.2 **Interfinancial Properties Inc** \$53,337.84 Last 4 digits of account number 6 Nonpriority Creditor's Name 1360 Peachtree Street, NE When was the debt incurred? Suite 750 Atlanta, GA 30309 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Loan 4.2 Joseph Kavana Unknown Last 4 digits of account number Nonpriority Creditor's Name c/o K Group Holdings Inc When was the debt incurred? 1601 Sawgrass Corp Pkwy, #140 Sunrise, FL 33323 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ No
□ Yes

Other. Specify

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debt

■ No
□ Yes

report as priority claims

■ Other. Specify Lease

 $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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debt

■ No

☐ Yes

Is the claim subject to offset?

■ Other. Specify Guarantee

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.3 Riverstone at Wildwood TH Assn \$2,753.67 Last 4 digits of account number 4 Nonpriority Creditor's Name PO Box 65851 When was the debt incurred? Phoenix, AZ 85082-5851 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify HOA Dues ☐ Yes 4.3 **Ronald Leventhal** \$15,200.30 Last 4 digits of account number 5 Nonpriority Creditor's Name 1360 Peachtree Street, NE When was the debt incurred? Suite 750 Atlanta, GA 30309 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Loans 4.3 Schreeder Wheeler & Flint LLP \$22.557.81 6 Last 4 digits of account number Nonpriority Creditor's Name 1100 Peachtree Street, NE When was the debt incurred? Suite 800 Atlanta, GA 30309 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

■ Other. Specify Legal Fees

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Document Page 37 of 55 Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.3 State Farm Insurance \$391.43 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 588002 When was the debt incurred? North Metro, GA 30029 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Insurance Premiums ☐ Yes 4.3 **Taylor English** \$20,500.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1600 Parkwood Circle When was the debt incurred? Suite 200 Atlanta, GA 30339 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Legal Fees 4.3 **Tivoli Communities Inc** \$50.160.28 Last 4 digits of account number 9 Nonpriority Creditor's Name 1360 Peachtree Street, NE When was the debt incurred? Suite 750 Atlanta, GA 30309 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

Other. Specify Loan

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.4 **Tivoli Properties Inc** \$54,841.95 Last 4 digits of account number 0 Nonpriority Creditor's Name 1360 Peachtree Street, NE When was the debt incurred? Suite 750 Atlanta, GA 30309 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Loan 4.4 Tommy Spinosa Jr \$75,000.00 Last 4 digits of account number Nonpriority Creditor's Name 3235 Roswell Road, NE When was the debt incurred? Atlanta, GA 30305 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Guarantee 4.4 U.S. Securities & Exchange Com \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Office of Reorganization When was the debt incurred? 950 E. Paces Ferry Rd, Ste 900 Atlanta, GA 30326 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify For Notice Purposes Only ☐ Yes

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Page 39 of 55 Document Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036 4.4 \$0.00 **United States Attorney** 3 Last 4 digits of account number Nonpriority Creditor's Name 600 Richard B. Russell Bldg. When was the debt incurred? 75 Ted Turner Drive, SW Atlanta, GA 30303 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify For Notice Purposes Only ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Tivoli Investment Holdings** Line 4.41 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims One Midtown Plaza, Suite 750 ■ Part 2: Creditors with Nonpriority Unsecured Claims 1360 Peachtree Street, NE Atlanta, GA 30309 Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	۰,		•	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$ 0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 86,098,633.80
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 86,098,633.80

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Fill in this infor	mation to identify your	case:	J	
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number	21-55036			
(if known)				☐ Check if this is a amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Mercedes Benz Financial Serv. 2799 Piedmont Road Atlanta, GA 30305	Automobile Lease
2.2	Various Operating Agreements and Shareholder Agreements	Various Operating Agreements and Shareholder Agreements

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		Docume	IIL Paye 41 01 33		
Fill in th	is information to identify your	case:			
Debtor 1	Scott Loren Leve	enthal			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
	3,				
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA		
Case nu	mber 21-55036				
(if known)				_	ck if this is an
				ame	ended filing
Offici	al Form 106H				
	dule H: Your Cod	obtore			40/45
Scrie	dule II. Toul Cou	EDIOIS			12/15
1. D N Y 2. W Ariz N Y 3. In C	lo les lifthin the last 8 years, have you lona, California, Idaho, Louisiana lo. Go to line 3. les. Did your spouse, former spoi	you are filing a joint case, of a lived in a community property, Nevada, New Mexico, Putuse, or legal equivalent live tors. Do not include your if that person is a guaran	do not list either spouse as a cod operty state or territory? (Comerto Rico, Texas, Washington, ar	munity property states and tended the states and tended wisconsin.) spouse is filing with you. Lise the creditor on S	t the person shown Schedule D (Official
	Column 2.	,, e	(, , , , , , , , , , , , , , , , , , , ,	
	Column 1: Your codebtor			umn 2: The creditor to whom	you owe the debt
	Name, Number, Street, City, State and Z	IP Code	Che	eck all schedules that apply:	
3.1	1122 Crescent Land Hold One Midtown Plaza, Suite 1360 Peachtree Street, NE Atlanta, GA 30309	750	■ s □ s	Schedule D, line Schedule E/F, line4.1 Schedule G F III Crescent LLC	-
3.2	1122 Crescent Land Hold One Midtown Plaza, Suite 1360 Peachtree Street, NE Atlanta, GA 30309	750	■ S	Schedule D, line Schedule E/F, line 4.6 Schedule G gel Oak Commercial Bridg	- ge
3.3	BHI 1138 Peachtree LLC One Midtown Plaza, Suite 1360 Peachtree Street, NE Atlanta, GA 30309		■ S □ S	Schedule D, line Schedule E/F, line4.20 Schedule G Linny LLC	_

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Case number (if known) 21-55036

Additional Page to List More Codebtors Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.4 **BHI 1138 Peachtree LLC** ☐ Schedule D, line One Midtown Plaza, Suite 750 ■ Schedule E/F, line 4.17 1360 Peachtree Street, NE ☐ Schedule G Atlanta, GA 30309 **CW Loan LLC** 3.5 Joseph Kavana ☐ Schedule D, line c/o K Group Holdings Inc ■ Schedule E/F, line 4.13 1601 Sawgrass Corp Pkwy, #140 ☐ Schedule G Sunrise, FL 33323 **CIM RE Lending Sub LLC** 3.6 Joseph Kavana ☐ Schedule D, line c/o K Group Holdings Inc ■ Schedule E/F, line 4.6 1601 Sawgrass Corp Pkwy, #140 ☐ Schedule G Sunrise, FL 33323 **Angel Oak Commercial Bridge** 3.7 **Tivoli Investment Holdings** ☐ Schedule D, line ___ One Midtown Plaza, Suite 750 ■ Schedule E/F, line 4.33 1360 Peachtree Street, NE ☐ Schedule G Atlanta, GA 30309 Richard Bowers 3.8 **TPKG 13th Street Development** ☐ Schedule D, line ___ One Midtown Plaza, Suite 750 ■ Schedule E/F, line 4.13 1360 Peachtree Street, NE ☐ Schedule G Atlanta, GA 30309 **CIM RE Lending Sub LLC**

Debtor 1 Scott Loren Leventhal

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Fill	in this information to identify your	case:							
Deb	otor 1 Scott Lore	n Leventhal			_				
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF GEORGIA		_				
1	21-55036 nown)						ent showing	postpetition	chapter
\bigcirc	fficial Form 106I							lowing date:	
	chedule I: Your Inc	rome				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as po plying correct information. If yo use. If you are separated and yo ch a separate sheet to this form t1:	u are married and not filing wi our spouse is not filing wi . On the top of any addition	ng jointly, and your s ith you, do not includ	pouse is le inforn	s living wit nation abo	h you, inclu ut your spo	ude informa	ation about y re space is n	your leeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more than one job,	5	■ Employed			☐ Emplo	yed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	Real Estate Deve	elopme	nt				
	Include part-time, seasonal, or self-employed work.	Employer's name	The Trillist Com	panies					
	Occupation may include studen or homemaker, if it applies.	Employer's address	One Midtown Pla 1360 Peachtree Atlanta, GA 3030	Street,					
		How long employed the	here? 7 Years			_			
Par	t 2: Give Details About M	onthly Income							
spou If yo	mate monthly income as of the use unless you are separated. but or your non-filing spouse have respace, attach a separate sheet	nore than one employer, co	, 3	•	, ,	·	•	,	J
					For D	ebtor 1	For Debt	tor 2 or g spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$1	6,000.00	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$16,	000.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Scott Loren Leventhal		Case	number (<i>if known</i>)	21-55	6036
				For	Debtor 1		Debtor 2 or filing spouse
	Сор	y line 4 here	4.	\$	16,000.00	\$	N/A
5.	l ist	all payroll deductions:					
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	6,150.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$ -	0.00	\$-	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A
	5e.	Insurance	5e.	\$_	230.74	\$	N/A
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A
	5g.	Union dues	5g.	\$_	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	6,380.74	\$	N/A
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	* — \$	9,619.26	\$ \$	N/A
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_ \$_	0.00	\$ 	N/A N/A
	8e.	Social Security	8e.	\$	0.00	\$	N/A
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$_ \$	0.00	\$ 	N/A N/A
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	· ·	N/A
			_				
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10.		tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$,	9,619.26 + \$_		N/A = \$ 9,619.26
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen				chedule J. 11. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest is that amount on the Summary of Schedules and Statistical Summary of Certain ies					12. \$ 9,619.26 Combined
13.		ou expect an increase or decrease within the year after you file this form	?				monthly income
		No. Yes. Explain: Current Income From Trillist Companies Due to E	Evel-	O4 41-	o End of A	1104 20	124
		Current income From Trinist Companies Due to E	-xhii e	מו וו	e Eliu oi Aug	u⊃ı, ∠U	74 1

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:						
Deb	tor 1	Scott Loren	Leventha	al		Cł	neck if this is:		
								· ·	
l	tor 2							nowing postpetition chapte	r
(Spo	ouse, if filing)						13 expenses as	of the following date:	
Unit	ed States Bankr	ruptcy Court for the	: NORTH	ERN DISTRICT OF GEOR	RGIA		MM / DD / YYYY	<u> </u>	
Cas	e number 21	1-55036							
(If k	nown)								
\bigcirc	fficial Fo	rm 106J							
			 Evnor						
		J: Your			<u> </u>				2/15
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.					
Par 1.	t 1: Descr	ribe Your House	ehold						
١.									
	■ No. Go to □ Yes. Doe		in a separ	ate household?					
	□и	0							
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate Housel	hold of D	ebtor 2.		
2.	Do you have	e dependents?	■ No						
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.						Yes	
								□ No	
								Yes	
								□ No	
								☐ Yes	
								□ No	
								Yes	
3.	, ,	enses include		No					
		f people other t d your depende		Yes					
		a your aoportao							
		ate Your Ongoi		- -					
exp				uptcy filing date unless y y is filed. If this is a supp					
Inc	lude expense	s paid for with	non-cash	government assistance i	f you know				
the	value of sucl	h assistance an		cluded it on Schedule I: Y			Vour o	xpenses	
(Ot	ficial Form 10	l6l.)					Tour e	xperises	
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgage		\$	0.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$	368.86	
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.		154.91	
		•		ıpkeep expenses		4c.	\$	480.00	
	4d. Home	owner's associa	tion or cond	dominium dues		4d.	\$	175.00	
5	Additional r	nortagae navm	ants for ve	ur residence such as ho	me equity loans	5	\$	0.00	

ebtor 1	Scott Loren Leventhal	Case num	ber (if known)	21-55036
. Utilitie	es:			
6a.	Electricity, heat, natural gas	6a.	\$	175.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	280.00
6d.	Other. Specify:	6d.	\$	0.00
Food	and housekeeping supplies	7.	\$	1,953.00
Childe	care and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	\$	150.00
	nal care products and services	10.	·	250.00
	al and dental expenses	11.		625.00
	portation. Include gas, maintenance, bus or train fare.			023.00
	t include car payments.	12.	\$	550.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	775.00
	able contributions and religious donations	14.	·	0.00
Insura		• • • •	–	0.00
	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	450.00
15b.	Health insurance	15b.	\$	0.00
	Vehicle insurance	15c.	·	172.00
	Other insurance. Specify: Personal Articles and GL Umbrella	15d.	·	85.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	03.00
Specif	y:	16.	\$	0.00
	ment or lease payments:	170	¢	2 205 40
	Car payments for Vehicle 1	17a.	·	2,305.48
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	· -	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		¢.	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.	10.	\$	
	• • • • • • • • • • • • • • • • • • • •	40	Φ	0.00
Specif	,	19.	Incomo	
	real property expenses not included in lines 4 or 5 of this form or on Sche Mortgages on other property	20a.		0.00
				0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	· ·	0.00
	Homeowner's association or condominium dues	20e.	*	0.00
Other	: Specify: Clothing	21.	+\$	500.00
Calcu	late your monthly expenses			
	dd lines 4 through 21.		\$	9,449.25
22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	dd line 22a and 22b. The result is your monthly expenses.		\$	9,449.25
Calcu	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	9,619.26
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	9,449.25
	• • •			,
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	170.01
For exa modific	u expect an increase or decrease in your expenses within the year after your ample, do you expect to finish paying for your car loan within the year or do you expect you ation to the terms of your mortgage?			ase or decrease because of a
■ No				
☐ Ye	S. Explain here:			

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Fill in this info	rmation to identify your	case:				
Debtor 1	Scott Loren Leve	Scott Loren Leventhal				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA			
Case number	21-55036					
(if known)	21 00000				Check if this is an amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	452,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	134,198.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	586,198.00
Par	t 2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	2,833,948.52
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	86,098,633.80
	Your total liabilities	\$	88,932,582.32
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	9,619.26
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	9,449.25
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other s	chedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and	submit this form to

the court with your other schedules.

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Debtor 1 Scott Loren Leventhal Case number (if known) 21-55036

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$
---	----

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$
9g. Total. Add lines 9a through 9f.	\$

Fill in this information to identify	your case:			
Debtor 1 Scott Loren				
First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for	r the: NORTHERN DISTRIC	T OF GEORGIA		
Case number 21-55036				
(if known)				Check if this is an amended filing
If two married people are filing to You must file this form whenever obtaining money or property by fi years, or both. 18 U.S.C. §§ 152, 1	you file bankruptcy schedule raud in connection with a ban	es or amended schedules.	Making a false statement, co	
Sign Below				
Did you pay or agree to pay	someone who is NOT an atto	orney to help you fill out ba	ankruptcy forms?	
■ No				
☐ Yes. Name of person				etition Preparer's Notice, nature (Official Form 119)
Under penalty of perjury, I de that they are true and correc	eclare that I have read the sun t.	nmary and schedules filed	d with this declaration and	
X /s/ Scott Loren Levent	411			
	tnai	X		
Scott Loren Leventha Signature of Debtor 1		XSignature of [Debtor 2	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia

In re	Scott Loren Leventhal		Case No.	21-55036
		Debtor(s)	Chapter	11
	DISCLOSURE OF COMPENS	ATION OF ATTO	RNEY FOR DE	EBTOR(S)
C	cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of e rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankruptcy	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept as a retainer		\$	48,411.50
	Prior to the filing of this statement I have received as a			48,411.50
	Balance Due		_	0.00
2. \$ <u>.</u>	1,738.00 of the filing fee has been paid.			
3. T	The source of the compensation paid to me was:			
	☐ Debtor	_eventhal		
4. T	The source of compensation to be paid to me is:			
	✓ Debtor			
5.	✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agreed to share the above-disclosed compensation. ✓ I have not agree the agreement of the above-disclosed compensation. ✓ I have not agree the agreement of the ag	ation with any other person	n unless they are mem	bers and associates of my law firm.
	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names			
6. Iı	n return for the above-disclosed fee, I have agreed to rende	r legal service for all aspec	cts of the bankruptcy c	ase, including:
b. c. d.		ent of affairs and plan which and confirmation hearing, a	ch may be required; and any adjourned hea	
	By agreement with the debtor(s), the above-disclosed fee do etainer	es not include the followir	ng service: Allowed fe	es and expenses which exceed the
	C	CERTIFICATION		
	certify that the foregoing is a complete statement of any agankruptcy proceeding.		or payment to me for re	epresentation of the debtor(s) in
7/2	28/21	/s/ J. Robert Wil	liamson	
Da	nte		IAMSON 765214	
		Signature of Attorn Scroggins & Wil		
		4401 Northside		
		Suite 450 Atlanta, GA 303	27	
			ax: 404-893-3886	
		centralstation@	swlawfirm.com	
		Name of law firm		

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United States Bankruptcy Court Northern District of Georgia

In re	Scott Loren Leventhal		Case No.	21-55036
		Debtor(s)	Chapter	
	STATEMENT REGARDING	PAY STUBS (11 U.S.	C. §521(<i>A</i>	A)(1))
not rec	I,, hereby certify that during the 60 day peri eive pay stubs from an employer because:	od preceding the filing of n	ny bankrupt	cy petition in this case, I did
	I am unemployed; or			
	I am self-employed; or			

Date	7/23/2021	Signature	/s/ Scott Loren Leventhal	

Debtor

My employer did not provide pay stubs.

Pay Stubs From My Employer Are Attached

√

Other

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Company Code RE / 5J7 21914057 01/05 Trillist Companies Inc 1360 Peachtree St NE Ste 750 Document Number Page 6382287 1 of 1 Page 52 of 55 Earnings Statement



Period Starting: Period Ending: Pay Date:

06/01/2021 06/15/2021 06/15/2021

Taxable Marital Status: Exemptions/Allowances: Federal: 0

Social Security Number:

State:

Local:

Atlanta, GA 30309

Single
Tax Override:
Federal:
State:
Local:
XXX-XX-XXX

Scott L Leventhal 5887 Riverstone Circle Atlanta, GA 30339

Earnings	ra	ite	hours/units	this period	year to date
Regular			0.00	6250.00	81666.66
	Gross Pay			\$6,250.00	\$81,666.66
			•		

Statutory Deductions	this period	year to date
Federal Income Social Security Medicare Georgia State Income	-1183.69 -380.35 -88.95 -334.53	18619.22 4995.46 1168.29 4450.80
Voluntary Deductions	this period	year to date
*Insurance - Medical *Insurance - Dental *Insurance - Vision	-104.39 -9.28 -1.70	983.21 94.30 17.24
Net Pay	\$4,147.11	

Other Benefits and Information	this period	year to date
Vacation		20.00
- Carry Over - Accrued Hours	4.62	30.00 71.58
- Taken Hours	0.00	0.00
- Balance	0.00	71.58
Deposits account number	transit/ABA	amount
	20000000	
XXXXXX2447	XXXXXXXXX	4147.11
Important Notes		

Basis of pay: Salaried

Your federal taxable wages this period are \$6,134.63 * Excluded from Federal taxable wages

Trillist Companies Inc 1360 Peachtree St NE Ste 750 Atlanta, GA 30309

Pay Date:

06/15/2021

Deposited to the account

account number

XXXXXX2447

transit/ABA

XXXXXXXX

amount 4147.11

Checking DirectDeposit

Scott L Leventhal 5887 Riverstone Circle

Atlanta, GA 30339

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Company Code RE / 5J7 21914057 01/05 Trillist Companies Inc 1360 Peachtree St NE Ste 750 Document Number Page 6338712 1 of 1 Page 53 of 55 Earnings Statement



Period Starting: Period Ending: Pay Date:

05/16/2021 05/31/2021 05/28/2021

Taxable Marital Status:

Exemptions/Allowances:
Federal: 0 Federal:
State: 0 State:
Local: 0 Local:

Social Security Number: XXX-XXXX

Atlanta, GA 30309

Scott L Leventhal 5887 Riverstone Circle Atlanta, GA 30339

Earnings	rate hours/units	this period	year to date
Regular	0.00	6250.00	75416.66
	Gross Pay	\$6,250.00	\$75,416.66
	Statutory Deductions	this period	year to date
	Federal Income Social Security Medicare Georgia State Income	-1183.69 -380.35 -88.95 -334.53	17435.53 4615.11 1079.34 4116.27
	Voluntary Deductions	this period	year to date
	*Insurance - Medical *Insurance - Dental *Insurance - Vision	-104.39 -9.28 -1.70	878.82 85.02 15.54
	Net Pay	\$4,147.11	

Other Benefits and Information	this period_	year to date
Vacation		
- Carry Over		30.00
 Accrued Hours 	4.62	66.96
- Taken Hours	0.00	0.00
- Balance		66.96
Deposits		
account number	transit/ABA	amount
XXXXXX2447	XXXXXXXX	4147.11
Important Notes		
Basis of pay: Salaried		

Your federal taxable wages this period are \$6,134.63 * Excluded from Federal taxable wages

Trillist Companies Inc 1360 Peachtree St NE Ste 750 Atlanta, GA 30309

Pay Date:

05/28/2021

Deposited to the account

account number

XXXXXX2447

transit/ABA

XXXXXXXX

amount 4147.11

Checking DirectDeposit

L Leventhal

Scott L Leventhal 5887 Riverstone Circle Atlanta, GA 30339

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Company Code RE / 5J7 21914057 Loc/Dept 01/05 Trillist Companies Inc

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1360 Peachtree St NE Ste 750 Atlanta, GA 30309

Period Starting: Period Ending: Pay Date:

05/01/2021 05/15/2021 05/14/2021

Taxable Marital Status: Single Exemptions/Allowances: Tax Override: Federal: Federal: State: State: Local: Local: Social Security Number: XXX-XX-XXXX

Scott L Leventhal 5887 Riverstone Circle Atlanta, GA 30339

Earnings	rate hours/units	this period	year to date
Regular	0.00	9250.00	69166.66
	Gross Pay	\$9,250.00	\$69,166.66
	Statutory Deductions	this period	year to date
	Federal Income Social Security Medicare Georgia State Income	-2078.86 -566.34 -132.45 -507.03	16251.84 4234.76 990.39 3781.74
	Voluntary Deductions	this period	year to date
	*Insurance - Medical *Insurance - Dental *Insurance - Vision	-104.39 -9.28 -1.70	774.43 75.74 13.84
	Net Pay	\$5,849.95	

Information	this period	year to date
Vacation		
- Carry Over		30.00
 Accrued Hours 	4.62	62.34
- Taken Hours	0.00	0.00
- Balance		62.34
Deposits		
account number	transit/ABA	amount
XXXXXX2447	XXXXXXXX	5849.95
Important Notes		

Basis of pay: Salaried

Your federal taxable wages this period are \$9,134.63 * Excluded from Federal taxable wages

Trillist Companies Inc 1360 Peachtree St NE Ste 750 Atlanta, GA 30309

Pay Date:

05/14/2021

Deposited to the account

account number

XXXXXX2447

transit/ABA

Checking DirectDeposit

XXXXXXXX

amount 5849.95

Scott L Leventhal 5887 Riverstone Circle Atlanta, GA 30339

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Company Code RE / 5J7 21914057 Loc/Dept 01/05 Trillist Companies Inc 1360 Peachtree St NE Ste 750

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Period Starting: Period Ending: Pay Date:

04/16/2021 04/30/2021 04/30/2021

Taxable Marital Status: Exemptions/Allowances:

Atlanta, GA 30309

Federal: State: Local: Social Security Number:

Single Tax Override: Federal: State: Local: XXX-XX-XXXX

Scott L Leventhal 5887 Riverstone Circle Atlanta, GA 30339

Earnings	rate hours/units	this period	year to date
Regular	0.00	8750.00	59916.66
	Gross Pay	\$8,750.00	\$59,916.66
	Statutory Deductions	this period	year to date
	Federal Income Social Security Medicare Georgia State Income	-1911.54 -535.35 -125.21 -478.28	14172.98 3668.42 857.94 3274.71
	Voluntary Deductions	this period	year to date
	*Insurance - Medical *Insurance - Dental *Insurance - Vision	-104.39 -9.28 -1.70	670.04 66.46 12.14
	Net Pay	\$5,584.25	

Other Benefits and Information	this period	year to date
Vacation - Carry Over - Accrued Hours - Taken Hours - Balance	4.62 0.00	30.00 57.72 0.00 57.72
Deposits account number	transit/ABA	amount
XXXXXX2447	XXXXXXXXX	5584.25

Your federal taxable wages this period are \$8,634.63 * Excluded from Federal taxable wages

Trillist Companies Inc 1360 Peachtree St NE Ste 750 Atlanta, GA 30309

Pay Date:

04/30/2021

Deposited to the account

Checking DirectDeposit

account number

XXXXXX2447

transit/ABA

XXXXXXXX

amount 5584.25

Scott L Leventhal 5887 Riverstone Circle Atlanta, GA 30339